

MULTIPLE DEPEN
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIM

SERIAL NO.

10 57453D

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT					
	IND.		DEP.		IND.			IND.		DEP.		IND.		DEP.			
1	1			1				51									
2								52									
3								53									
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47								97									
48								98									
49								99									
50								100									
TOTAL IND.								1									
TOTAL DEP.								17									
TOTAL CLAIMS								18									